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SEP 19 2005

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Facsimile Transmittal

DATE: September 19, 2005

TO: USPTO

ATTN: AMENDMENT

RE: Serial No. 09/898,532

FAX : 571-273-8300

FROM: George C. Pappas

Number of Pages Sent: 9 (including this transmittal cover sheet)

ATTACHED HERETO PLEASE FIND AN AMENDMENT IN 7 PAGES;
TRANSMITTAL FORM (1) PAGE;

PLEASE CALL ME IF YOU HAVE ANY QUESTIONS.

I hereby certify that this correspondence is being sent VIA FACSIMILE to the Commissioner of Patents at fax number (571) 273-8300. Attention: Office of Amendments, on

9/19/05

(Date of Deposit)

Darla D. Kasmedo

(Name of the Person Making the Deposit)

(Signature)

PTO/SB/21

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Patent and Trademark Office
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AMENDMENT TRANSMITTAL FORM

Mail Stop Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450Customer No.: 23696
Attorney Docket No.: 000195
In Re Application of: Raymond C. Wallace
Serial Number: 09/898,532
Filed: 07/02/2001
Examiner: Harry S. Hong
Group Art Unit: 2642

SEP 19 2005

Dear Sir:

Transmitted herewith for filing is a Response to Office Action in the above identified application.

CLAIMS	(a) Number Remaining After Amendment	(b) Highest Number Previously Paid For	(c) Extra Claims	Large Entity Fee	Fee Paid
Total*	20	20		x \$50 =	\$0
Independent**	2	3		x \$200 =	\$0
Multiple Dependent Claim(s): <input type="checkbox"/> Yes <input type="checkbox"/> No				\$360	\$
EXTENSION FEES <input type="checkbox"/> One Month <input type="checkbox"/> Two Months <input type="checkbox"/> Three Months				\$120	\$
				\$450	\$
				\$1020	\$
TERMINAL DISCLAIMER				\$130	\$
				TOTAL FEE	\$0

*If the number in column a is less than 20, enter 0 in column c.
**If the number in column a is less than 3, enter 0 in column c.

4. ☐ Fee check in the amount of \$_____ is enclosed to pay for any claim and/or extension fees.
5. ☒ Please charge Deposit Account No. 17-0026 of QUALCOMM Incorporated the amount of \$0.
The Commissioner is hereby authorized to charge payment of any additional fees that may be required, or credit any overpayment to said Deposit Account No. 17-0026. A duplicate of this sheet is enclosed for fee processing.
6. ☒ The Commissioner is further hereby authorized to charge to said Deposit Account No. 17-0026, pursuant to 37 CFR 1.25(b), any fee whatsoever which may become properly due or payable, as set forth in 37 CFR 1.16 to 37 CFR 1.18 inclusive, for the entire pendency of this application without specific additional authorization.

Date: 9/19/05

Signature: _____

George C. Pappas, Reg. No. 35,065
858-651-1306QUALCOMM Incorporated
Attn: Patent Department
5775 Morehouse Drive
San Diego, California 92121-1714
Telephone: (858) 658-5787
Facsimile: (858) 658-2502

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

I hereby certify that this correspondence is, on the date shown below, being:

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- ☐ deposited with the United States Postal Service with sufficient postage as first class mail, in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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Date: 9/19/05

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Depositor's Name: Daria Kasmirio

(type or print name)

Signature: _____

**PATENT
RECEIVED
CENTRAL FAX CENTER**

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

SEP 19 2005

In Re Application

No. 09/898,532

**For: METHOD AND APPARATUS
FOR TESTING AND
EVALUATING WIRELESS
COMMUNICATION DEVICES**

Raymond C. Wallace

Examiner: Harry S. Hong

Filed: 07/02/2001

Group No. 2642

RESPONSE TO OFFICE ACTION

**Mail Stop No Fee Amendment
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450**

Dear Commissioner:

In response to the Office Action dated June 30, 2005 please consider the following remarks starting on page 5.

CERTIFICATE OF MAILING/TRANSMISSION (37 CFR 1.8(a))

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Signature: _____

FACSIMILE

- ☒ transmitted by facsimile to the Patent and Trademark Office.

Depositor's Name: Daria Kasmeda
(type or print name)

Date: 9/19/05

Signature: 

Attorney Docket No.: 000195
Customer No.: 23696